

| | | | | |
|----------------------|-------------------------|--------------|------------------------|--------------------------------|
| NUMBER 09/443,072 | FILING DATE 11/18/99 | CLASS 705 | GROUP ART UNIT 2768 | ATTORNEY DOCKET NO. 483-001 |
|----------------------|-------------------------|--------------|------------------------|--------------------------------|

BRIAN A. ROSENFELD MD, BALTIMORE, MD; MICHAEL BRESLOW, LUTHERVILLE, MD.

CONTINUING DOMESTIC DATA***
VERIFIED

OK

371 (NAT'L STAGE) DATA***
VERIFIED

OK

FOREIGN APPLICATIONS***
VERIFIED

OK

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 01/05/00 ** SMALL ENTITY **

| | | | | | |
|---|--|------------------------|----------------------|--------------------|-------------------------|
| Foreign Priority claimed US 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY MD | SHEETS DRAWING 56 | TOTAL CLAIMS 14 | INDEPENDENT CLAIMS 2 |
| and Acknowledged | Examiner's Initials <u>OK</u> Initials _____ | | | | |

ROBERTS ABOKHAIR & MARDULA LLC
SUITE 1000
1800 SUNRISE VALLEY DRIVE
ESTON VA 20191-5302

SYSTEM AND METHOD FOR PROVIDING CONTINUOUS, EXPERT NETWORK CRITICAL
ARE SERVICES FROM A REMOTE LOCATION(S)

| | |
|--|---|
| G FEE IVED FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|--|---|



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PAT.
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20503
www.uspto.gov

BIBDATASHEET

CONFIRMATION NO. 6723

Bib Data Sheet

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER 09/443,072 | FILING DATE 11/18/1999 RULE | CLASS 705 | GROUP ART UNIT 3627 | ATTORNEY DOCKET NO. 483-001 |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|

APPLICANTS

BRIAN A. ROSENFELD MD, BALTIMORE, MD;

MICHAEL BRESLOW, LUTHERVILLE, MD;

** CONTINUING DATA *****

60/141,520 6/23/99

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 01/05/2000

| | | | | | |
|--|--|---------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions Met after Allowance | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY MD | SHEETS DRAWING 56 | TOTAL CLAIMS 14 | INDEPENDENT CLAIMS 2 |
| Verified and Acknowledged | Examiner's Signature | Initials | | | |

ADDRESS

ROBERTS ABOKHAIR & MARDULA LLC

SUITE 1000

11800 SUNRISE VALLEY DRIVE

PESTON, VA

201915302

TITLE

SYSTEM AND METHOD FOR PROVIDING CONTINUOUS, EXPERT NETWORK CRITICAL CARE SERVICES
FROM A REMOTE LOCATION(S)

FILING FEE

FEES: Authority has been given in Paper

No. _____ to charge/credit DEPOSIT ACCOUNT

RECEIVED

No. _____ for following:

380

☐ All Fees☐ 1.16 Fees (Filing)☐ 1.17 Fees (Processing Ext. of
time)☐ 1.18 Fees (Issue)☐ Other _____☐ Credit



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 6723

| | | | | |
|---|---|--------------------------------|---|---------------------------------------|
| SERIAL NUMBER 09/443,072 | FILING OR 371(c) DATE 11/18/1999 RULE | CLASS 705 | GROUP ART UNIT 3627 | ATTORNEY DOCKET NO. 483-001 |
| APPLICANTS BRIAN A. ROSENFELD MD, BALTIMORE, MD; MICHAEL BRESLOW, LUTHERVILLE, MD; | | | | |
| ** CONTINUING DATA ***** This appln claims benefit of 60/141,520 06/23/1999 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 01/05/2000 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance | | STATE OR COUNTRY MD | SHEETS DRAWING 56 | TOTAL CLAIMS 14 |
| Verified and Acknowledged Examiner's Signature _____ Initials _____ | | INDEPENDENT CLAIMS 2 | | |
| ADDRESS 22208 | | | | |
| TITLE SYSTEM AND METHOD FOR PROVIDING CONTINUOUS, EXPERT NETWORK CRITICAL CARE SERVICES FROM A REMOTE LOCATION(S) | | | | |
| FILING FEE RECEIVED 380 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |